(b) Government of India took a series of actions. A comprehensive plan including guidelines and standard operating procedures were put in place. Travel advisory was issued to defer non essential travel to the affected countries. Entry screening of passengers started at 22 international airports and five international checkpoints Community surveillance to detect clusters of influenza like illness is being done through Integrated Disease Surveillance Project. National Institute of Communicable Diseases, Delhi and National Institute of Virology, Pune are testing clinical samples. Sixteen additional laboratories have also started testing. There is adequate quantity of Oseltamivir, the drugs and protective equipments. License has been issued to three Indian manufacturers for importing seed virus to manufacture flu vaccine. Short term media plan has been implemented. Travel advisory, do's and don'ts and other pertinent information has been widely published to alley fear and avoid panic. Media is kept informed on daily basis.

The pandemic preparedness and response calls for actions in sectors beyond health. National Disaster Management Authority has issued guidelines for such actions. All States have been requested to gear up the State machinery and strengthen isolation facilities including critical care facilities at district level. Government is fully geared up to deal with the situation.

(c) Yes. Medical teams are functioning at 22 International Airports and sea ports to detect the disease among passengers coming to India.

(d) Yes. Isolation facilities have been identified and attached to all the International Airports and sea ports to treat cases of Influenza A H1N1.

Shortage of vaccines

805. SHRI RAJEEV CHANDRASEKHAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the steps Government proposes to take to address the shortage of vaccines in various States, following the closure of public sector manufacturing units last year;

(b) whether it is a fact that Government is looking for private companies to meet such demand for the affected States; and

(c) if so, how does Government proposes to address the cost and accessibility implications that are bound to arise from such a step?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) After the suspension of vaccine production at vaccines Institutes of the Ministry of Health & Family Welfare, vaccine procurement is being carried out from other PSUs as well as private sector to meet the present requirement.

(c) Vaccine procurement is being carried out on the basis of competitive rates by inviting tenders from other PSUs as well as indigenous private sector units to meet the present requirement. There is no problem in accessibility of vaccines and at present there is no shortage of vaccines.